2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 237056

1. Entity Name
LAKE PLACID PUBLISHING CO

Principal Place of Business	Mailing Address
231 N. MAIN AVE LAKE PLACID, FL 33852-2607	204 E PARK ST LAKE PLACID, FL 33852-6363

02022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1001732
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DELANEY, MARY C
204 EAST PARK STREET
LAKE PLACID, FL 33852-6363

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Mary Constance Delaney 02-02-06
Signature, typed or printed name of registered agent and title if applicable. (Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PCEO
NAME	DELANEY, CONSTANCE M
STREET ADDRESS	204 E PARK STREET
CITY-ST-ZIP	LAKE PLACID, FL 33852
TITLE	VD
NAME	DELANEY, ROBERT M
STREET ADDRESS	231 N. MAIN AVE
CITY-ST-ZIP	LAKE PLACID, FL 338522607
TITLE	STDC
NAME	RIDGEWAY, KAYE D
STREET ADDRESS	204 E PARK STREET
CITY-ST-ZIP	LAKE PLACID, FL 33852
TITLE	D
NAME	DELANEY, LAMONTE L
STREET ADDRESS	207 BOREN AVENUE
CITY-ST-ZIP	LAKE PLACID, FL 33852
TITLE	D
NAME	DELANEY, MARK L
STREET ADDRESS	446 REDWAKER LANE
CITY-ST-ZIP	LAKE PLACID, FL 33852
TITLE	D
NAME	STAIK, MARY M
STREET ADDRESS	409 GRAND PRIX DRIVE
CITY-ST-ZIP	SEABRING, FL 33870

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02/18/06-80017-021 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kaye Delaney Ridgeway 02-02-06 863-465-3047
SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR Date Daytime Phone #